

**Frank M Quaglia****Town of West Boylston****Earnings Statement**35 Terry Lane  
Barre, MA 01005Employee Id 1507  
Soc Sec Nbr 034-54-7064Department 013255100  
Branch  
DepartmentCheck Date October 6, 2006  
Period Beginning September 17, 2006  
Period Ending September 30, 2006Check Number 147725  
Net Pay 327.78  
Check Amount 327.78

Earnings	Rate	Hours	Amount	YTD Amt	Deductions	Amount	YTD Amt
Regular Ea	60.0000	6.00	360.00	2,520.00	OBRA-Ma	27.00	189.00

Gross Earnings	6.00	360.00	2,520.00
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Deductions	27.00	189.00
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Taxes	Status	Taxable	Amount	YTD Amt
MA	M-7	333.00		3.46
MED		360.00	5.22	36.54

Direct Deposits	Type	Transit	Account	Amount
No Direct Deposits				

Taxes	5.22	40.00
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REMOVE DOCUMENT ALONG THIS PERFORATION

**Frank M Quaglia****Town of West Boylston****Earnings Statement**35 Terry Lane  
Barre, MA 01005Employee Id 1507  
Soc Sec Nbr 034-54-7064Department 013255100  
Branch  
DepartmentCheck Date September 22, 2006  
Period Beginning September 3, 2006  
Period Ending September 16, 2006Check Number 147627  
Net Pay 382.22  
Check Amount 382.22

Earnings	Rate	Hours	Amount	YTD Amt
Regular Ea	60.0000	7.00	420.00	2,160.00

Deductions	Amount	YTD Amt
OBRA-Ma	31.50	162.00

Gross Earnings	7.00	420.00	2,160.00
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Deductions	31.50	162.00
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Taxes	Status	Taxable	Amount	YTD Amt
MA	M-7	388.50	0.19	3.46
MED		420.00	6.09	31.32

Direct Deposits	Type	Transit	Account	Amount
No Direct Deposits				

Taxes	6.28	34.78
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**Frank M Quaglia****Town of West Boylston****Earnings Statement**35 Terry Lane  
Barre, MA 01005Employee Id 1507  
Soc Sec Nbr 034-54-7064Department 013255100  
Branch  
DepartmentCheck Date September 8, 2006  
Period Beginning August 20, 2006  
Period Ending September 2, 2006Check Number 147534  
Net Pay 218.52  
Check Amount 218.52

Earnings	Rate	Hours	Amount	YTD Amt
Regular Ea	60.0000	4.00	240.00	1,740.00

Deductions	Amount	YTD Amt
OBRA-Ma	18.00	130.50

Gross Earnings	4.00	240.00	1,740.00
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Deductions	18.00	130.50
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Taxes	Status	Taxable	Amount	YTD Amt
MA	M-7	222.00		3.27
MED		240.00	3.48	25.23

Direct Deposits	Type	Transit	Account	Amount
No Direct Deposits				

Taxes	3.48	28.50
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REMOVE DOCUMENT ALONG THIS PERFORATION

35 Terry Lane  
Barre, MA 01005

Phone: (978) 355-3456  
Fax: (978) 355-3557  
E-mail: frank\_quaglia@hotmail.com

## Frank Quaglia

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<b>Objective</b>	To use my interpersonal, analytical, planning, and communication skills to benefit an employer who values a creative, ethical, entrepreneurial approach stressing leadership, teamwork, and personal accountability.		
<b>Experience</b>	2002 – 2005	C. D. Productions	Worcester, MA
	<b>Screenplay Writer / Producer</b>		
	<ul style="list-style-type: none"> <li>Contracted with an individual to write, produce, and direct a comedic screenplay based upon his life.</li> <li>Finished the screenplay and began pre-production work.</li> <li>Project ended because it lacked funding.</li> </ul>		
	2000 – 2002	West Boylston High School	West Boylston, MA
	<b>Substitute Teacher / Tutor</b>		
	<ul style="list-style-type: none"> <li>Taught all subjects to students the first year.</li> <li>Tutored special education students in all subjects the second year.</li> </ul>		
	1991 – 2000	Wandering Dreamer	Worcester, MA
	<b>President</b>		
	<ul style="list-style-type: none"> <li>Created the movies <i>The Ultimate Audition</i> and <i>The Quiet Song of Life</i>.</li> <li>Personally fundraised to produce these movies, generating \$100,000+.</li> <li>Successfully managed relationships with the media, schools, film crews, editors, actors, artists, investors, sponsors, and government officials.</li> <li>Wrote the children's books <i>The Quiet Song of Life</i> and <i>Nothing Really Matters</i>.</li> </ul>		
	1989 – 1990	Grafton Job Corps	Grafton, MA
	<b>Instructor</b>		
	<ul style="list-style-type: none"> <li>Taught reading skills to adolescents and young adults.</li> <li>Successfully managed relationships with a student population typically characterized as aggressive, violent, and, in some cases, criminal.</li> </ul>		
	1988 – 1989	Fleet of Painters	Holden, MA
	<b>Owner</b>		
	<ul style="list-style-type: none"> <li>Established a business and employed college students to paint houses.</li> <li>Developed all marketing strategies and advertising text.</li> </ul>		
	1986 – 1987	FotoMat Corporation	Grafton, MA
	<b>Supervisor</b>		
	<ul style="list-style-type: none"> <li>Trained and supervised 10 employees at five locations.</li> <li>Significantly increased sales of camera products and accessories.</li> </ul>		
<b>Education</b>	1986	Worcester State College	Worcester, MA
	<ul style="list-style-type: none"> <li>BA English</li> </ul>		
<b>References</b>	Available upon request		





# ATHOL SAVINGS BANK

Proud of Our Past, Focused on the Future

## Main Office

444 Main Street

P.O. Box 937 · Athol, MA 01331

Tel (978) 249-3200 · (888) 830-3200

Fax (978) 249-2467

## Loan Servicing

112 Central Street · Winchendon, MA 01475

Tel (978) 297-0260

Fax (978) 297-0718

October 5, 2006

To Whom It May Concern:

The below named Athol Savings Bank customer has Social Security direct deposit for the benefit of Jory Quaglia, Zachary Quaglia, and Forest Quaglia (including SSI Disability direct deposit) in the amount of \$2,057.40 to their account #880803226.

Customer Name: Janet Quaglia  
35 Terry Lane  
Barre MA 01005-9265

Sincerely,

A handwritten signature in black ink, appearing to read "Dana Hardy", is written over a large, faint circular stamp or watermark.

Dana Hardy  
Customer Service Representative  
Barre Branch  
Athol Savings Bank



1. Mass. Division of Unemployment Assistance <b>TEL CLAIMS CTR P.O. BOX 9694 BOSTON MA 02114 Tel.: *877-626-6800 Fax: 617-727-7837</b>	2. <b>BENEFIT DETERMINATION (ALT) REVISED</b>	3. Page: <b>1 OF 1</b>	<b>DUA</b> MASSACHUSETTS DIVISION OF UNEMPLOYMENT ASSISTANCE
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\*IN AREA CODES 617, 781, 857 AND 339 CALL 617-626-6800.

REFER TO THE INSERT "HOW TO READ YOUR BENEFIT DETERMINATION" FOR AN EXPLANATION OF HOW YOUR BENEFITS ARE CALCULATED. CALL THE NUMBER ABOVE WITH QUESTIONS. THIS IS A DETERMINATION OF MONETARY ELIGIBILITY ONLY. IT DOES NOT NECESSARILY ENTITLE YOU TO BENEFITS. YOU HAVE THE RIGHT TO APPEAL THIS DETERMINATION.

4. SSA No.: <b>034-54-7064</b>		7. Name and Address: <b>FRANK QUAGLIA 35 TERRY LANE BARRE MA 01005</b>					FOR D.U.A. USE ONLY <b>00985</b>				
5. Date Mailed: <b>12-22-05</b>											
6. Effective Date: <b>12-11-05</b>											
8. Employer Name	9. Employer Identification Number	10. Wg. Cd.	11. Af. Cd.	12. Sp. Cd.	13. Latest Separation Date	14. BASE PERIOD WAGES PAID BY EACH EMPLOYER					16. TOTAL BASE PERIOD WAGE PAID BY EMPLOYER
						XX-XX-XX XX-XX-XX	01-01-05 TO 03-31-05	04-01-05 TO 06-30-05	07-01-05 TO 09-30-05	LAG 10-01-05 TO 12-10-05	
<b>W H GRAH</b>	<b>82-240090</b>	<b>S</b>	<b>N</b>	<b>L</b>	<b>12-10-05</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>5567.00</b>	<b>8574.00</b>	<b>14141.00</b>
15. TOTAL ELIGIBLE WAGES BY QUARTER						<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>5567.00</b>	<b>8574.00</b>	<b>14141.00</b>

\* State Law limits potential duration to 26 weeks beginning 03-10-02

17. <b>BENEFIT RATE</b> <b>330.00</b>	+	18. <b>DEPENDENCY ALLOWANCE</b> <b>75.00</b>	=	19. <b>WEEKLY PENSION DEDUCTION</b> <b>0.00</b>	=	20. <b>PAY RATE</b> <b>405.00</b>
21.* <b>BENEFIT CREDIT</b> <b>5090</b>	22.* <b>POTENTIAL DURATION</b> <b>16.0</b>	23. <b>EARNINGS EXCLUSION</b> <b>110.00</b>	24. <b>TYPE COMP. FORMULA</b> <b>%</b>	25. <b>AVERAGE WEEKLY WAGE</b> <b>660.00</b>		

YOU ARE MONETARILY ELIGIBLE FOR BENEFITS USING YOUR ALTERNATE BASE PERIOD ONLY. THE BASE PERIOD ELECTION DOES NOT APPLY TO YOUR CLAIM.

D.U.A. USE ONLY		
Office #: <b>26</b>	Claimant Name, Social Security Number: <b>FRANK QUAGLIA 034-54-7064</b>	Determination Mail Date: <b>12-22-05</b>



**TeleCert/WebCert  
Unemployment Insurance  
Benefit Claim Certification by Telephone or Web**

Your unemployment insurance benefit check is attached below. Before you cash the check, detach it and keep the stub for your records.



**File every week that you are unemployed or working part-time.** (If you worked full-time, you are not eligible for benefits for that week and should not file.)

**Here's how to file for benefits.**

✓ **Call:** 617-626-6338 or use the Internet. Go to [www.mass.gov/dua](http://www.mass.gov/dua) (follow the instructions on the screen).

✓ **Days/times to file:** Sunday to Friday, from 7:00 a.m. to 7:00 p.m. (same hours on the Internet)

Sunday is the first day of the week you can call to claim benefits for the previous week.  
Not available on Saturdays or legal holidays.

✓ **Information you will need:**

- ☐ Your Social Security Number
- ☐ For Telecert use your 4-digit Personal Identification Number (PIN). For WebCert log in with a User Name & Password.
- ☐ The amount of your gross earnings if you worked during the week claimed. Include holiday pay.

✓ **Answer these three questions:**

You are answering these questions only for the week that you are claiming benefits.

- ☐ During the week claimed, did you look for work?
- ☐ During the week claimed, were you able to work and available for work?
- ☐ During the week claimed, did you work or earn holiday pay?

Failure to report employment and wages while collecting Unemployment Insurance may result in penalties and/or prosecution.  
(If you answer "yes" to this question, you will be asked to enter the amount of your earnings in dollars and cents. Include holiday pay. If you do not know how much you earned, you will need to call Telecert again or use WebCert again to report your earnings. This may delay your benefits).

**To reactivate your claim:**

If you do not claim benefits for even one week - because you returned to work or another reason - your claim will "close". You may reactivate it by calling the DUA TeleClaim Center. Call one of the numbers below to speak to a claims agent.

Form 1042 Rev 03-29-06



**TeleClaim Center:** Call one of these numbers when you need to speak to a claims agent. Call 1-877-626-6800 if you are calling from area codes 351, 413, 508, 774, and 978. From any other area code, call 617-626-6800.

WEEK ENDING	GROSS EARNINGS	DEP ALLOW	DEDUCTIONS							NET PAYMENT
			EARNINGS	PENSION	CHILD SUPP	OVER PYMT	FED TAX	STATE TAX	HEALTH INS	
04/08/06	0.00	75.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	215.00
SOC SEC ACCT NO XXX-XX-7064	BENEFIT RATE 330.00	CHECK NO 24-326994	CHECK DATE 04/10/06	CHECK AMOUNT 215.00	BALANCE 0.00					

SEE OTHER  
SIDE FOR  
REMINDERS





**TeleCert/WebCert  
Unemployment Insurance  
Benefit Claim Certification by Telephone or Web**

Your unemployment insurance benefit check is attached below. Before you cash the check, detach it and keep the stub for your records.



**File every week that you are unemployed or working part-time.** (If you worked full-time, you are not eligible for benefits for that week and should not file.)

**Here's how to file for benefits.**

✓ **Call:** 617-626-6338 or use the Internet. Go to [www.mass.gov/det](http://www.mass.gov/det) (follow the instructions on the screen).

✓ **Days/times to file:** Sunday to Friday, from 7:00 a.m. to 7:00 p.m. (same hours on the Internet)

Sunday is the first day of the week you can call to claim benefits for the previous week.  
Not available on Saturdays or legal holidays.

✓ **Information you will need:**

- ☐ Your Social Security Number
- ☐ For Telecert use your 4-digit Personal Identification Number (PIN). For WebCert log in with a User Name & Password.
- ☐ The amount of your gross earnings if you worked during the week claimed. Include holiday pay.

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(If you answer "yes" to this question, you will be asked to enter the amount of your earnings in dollars and cents. Include holiday pay. If you do not know how much you earned, you will need to call Telecert again or use WebCert again to report your earnings. This may delay your benefits).

**To reactivate your claim:**

If you do not claim benefits for even one week - because you returned to work or another reason - your claim will "close". You may reactivate it by calling the DUA TeleClaim Center. Call one of the numbers below to speak to a claims agent.

Form 1042 Rev 06-15-04



**TeleClaim Center: Call one of these numbers when you need to speak to a claims agent. Call 1-877-626-6800 if you are calling from area codes 351, 413, 508, 774, and 978. From any other area code, call 617-626-6800.**

WEEK ENDING	GROSS EARNINGS	DEP ALLOW	DEDUCTIONS							NET PAYMENT
			EARNINGS	PENSION	CHILD SUPP	OVER PYMT	FED TAX	STATE TAX	HEALTH INS	
12/24/05	0.00	75.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	405.00
SOC SEC ACCT NO XXX-XX-7064	BENEFIT RATE 330.00	CHECK NO 23-031179	CHECK DATE 12/27/05	CHECK AMOUNT 405.00	BALANCE 4760.00					

**SEE OTHER  
SIDE FOR  
REMINDERS**





a Control number		OMB No. 1545-0008		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.	
b Employer identification number (EIN) <b>04-1983255</b>		1 Wages, tips, other compensation <b>14,141.00</b>		2 Federal income tax withheld <b>0</b>	
c Employer's name, address, and ZIP code <b>W.N. GRAHAM CORP. 838 MAIN ST. WORCESTER, MA 01601-1444</b>		3 Social security wages <b>14,141.00</b>		4 Social security tax withheld <b>877.65</b>	
		5 Medicare wages and tips <b>14,141.00</b>		6 Medicare tax withheld <b>205.91</b>	
		7 Social security tips		8 Allocated tips	
d Employee's social security number <b>034-54-7064</b>		9 Advance EIC payment		10 Dependent care benefits	
e Employee's first name and initial Last name <b>FRANK QUAGLIA</b>		11 Nonqualified plans		12a See instructions for box 12	
<b>35 TERRY LANE BARRE, MA 01005</b>		13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b	
		14 Other		12c	
				12d	
f Employee's address and ZIP code					
15 State Employer's state ID number <b>MA 041-383-255</b>	16 State wages, tips, etc. <b>14,141.00</b>	17 State income tax <b>557.44</b>	18 Local wages, tips, etc.	19 Local income tax	20 Locality na

Form **W-2** Wage and Tax Statement  
 Copy C For EMPLOYEE'S RECORDS. (See Notice to Employee on back of Copy B.)

**2005**

Department of the Treasury—Internal Revenue Service

Safe, accurate,  
FAST! Use

<input type="checkbox"/> CORRECTED (if checked)		OMB No. 1545-0115		<b>Miscellaneous Income</b>  <b>Copy B For Recipient</b>
PAYER'S name, street address, city, state, ZIP code, and telephone no. <b>CLUB DEAD PRODUCTIONS PETER A. STEFAN 838 MAIN STREET WORCESTER, MA 01611-1444</b>		<b>2005</b> Form 1099-MISC		
PAYER'S Federal identification number <b>026-28-2039</b>		4 Federal income tax withheld <b>0</b>		
RECIPIENT'S identification number <b>034-54-7064</b>		6 Medical and health care payments <b>\$</b>		
RECIPIENT'S name <b>FRANK QUAGLIA</b>		7 Nonemployee compensation <b>\$ 5000.00</b>		This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.) <b>35 TERRY LANE</b>		8 Substitute payments in lieu of dividends or interest <b>\$</b>		
City, state, and ZIP code <b>BARRE MA 01005</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> <input type="checkbox"/> <b>\$</b>		
Account number (see instructions) <b></b>		10 Crop insurance proceeds <b>\$</b>		
11		12		
13 Excess golden parachute payments <b>\$</b>		14 Gross proceeds paid to an attorney <b>\$</b>		
15a Section 409A deferrals <b>\$</b>		15b Section 409A income <b>\$</b>		18 State income <b>\$ 5000.00</b>
16 State tax withheld <b>0</b>		17 State/Payer's state no. <b>026-28-2039</b>		

Form 1099-MISC

(keep for your records)

Department of the Treasury - Internal Revenue Service



☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no. <b>W. H. GRAHAM CORP.</b> <b>838 MAIN ST.</b> <b>WORCESTER, MA 01610-1444</b>		1 Rents	OMB No. 1545-0115 <b>2005</b> Form 1099-MISC		<b>Miscellaneous Income</b>		
		\$					
		2 Royalties					
PAYER'S Federal identification number <b>04-1383255</b>	RECIPIENT'S identification number <b>034-54-7064</b>	3 Other income	4 Federal income tax withheld	<b>Copy B For Recipient</b>			
		\$	\$ <b>0</b>				
RECIPIENT'S name <b>FRANK QUAGLIA</b> Street address (including apt. no.) <b>35 TERRY LANE</b> City, state, and ZIP code <b>BARRE, MA 01005</b>	5 Fishing boat proceeds \$	6 Medical and health care payments	7 Nonemployee compensation <b>\$ 12,500.00</b>	8 Substitute payments in lieu of dividends or interest \$	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.		
		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds				
		11	12				
Account number (see instructions)		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney				
		\$	\$				
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income			
\$	\$	\$ <b>0</b>	<b>041-383-255</b>	\$ <b>12,500.00</b>			

Form 1099-MISC

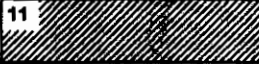

(keep for your records)

Department of the Treasury - Internal Revenue Service

PAYER'S name, street address, city, state, ZIP code, and telephone no. <b>CLUB DEAD PRODUCTIONS PETER A. STEFAN 338 MAIN STREET WORCESTER MA 01610-1444</b>		1 Rents \$	2 Royalties \$	3 Other income \$	4 Federal income tax withheld \$ 0	Miscellaneous Income
PAYER'S Federal identification number <b>026-28-2039</b>	RECIPIENT'S identification number <b>034-54-7064</b>	5 Fishing boat proceeds \$	6 Medical and health care payments \$	7 Nonemployee compensation \$ <b>30,000.00</b>	8 Substitute payments in lieu of dividends or interest \$	
RECIPIENT'S name <b>FRANK QUAGLIA</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> \$		10 Crop insurance proceeds \$		This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.) <b>35 TERRY LANE</b>		11 		12 		
City, state, and ZIP code <b>BARRE, MA 01005</b>		13 Excess golden parachute payments \$		14 Gross proceeds paid to an attorney \$		
Account number (optional)		15		16 State tax withheld \$ 0		
				17 State/Payer's state no. <b>026-28-2039</b>		18 State income \$ <b>30,000.00</b>

Form 1099-MISC (keep for your records) Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no. <b>CLUB DEAD PRODUCTIONS PETER A. STEFAN 338 MAIN STREET WORCESTER MA 01610-1444</b>		1 Rents \$	2 Royalties \$	3 Other income \$	4 Federal income tax withheld \$ 0	Miscellaneous Income
PAYER'S Federal identification number <b>026-28-2039</b>	RECIPIENT'S identification number <b>034-54-7064</b>	5 Fishing boat proceeds \$	6 Medical and health care payments \$	7 Nonemployee compensation \$ <b>30,000.00</b>	8 Substitute payments in lieu of dividends or interest \$	
RECIPIENT'S name <b>FRANK QUAGLIA</b>		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/> \$		10 Crop insurance proceeds \$		Copy 2 To be filed with recipient's state income tax return, when required.
Street address (including apt. no.) <b>35 TERRY LANE</b>		11 		12 		
City, state, and ZIP code <b>BARRE, MA 01005</b>		13 Excess golden parachute payments \$		14 Gross proceeds paid to an attorney \$		
Account number (optional)		15		16 State tax withheld \$ 0		
				17 State/Payer's state no. <b>026-28-2039</b>		18 State income \$ <b>30,000.00</b>

Form 1099-MISC Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

Name, ZIP code, and telephone no. <b>PRODUCTIONS</b> <b>STEAM</b> <b>914 STREET</b> <b>TEA MA 01610-1444</b>	<b>1 Rents</b> \$	OMB No. 1545-0115 <b>2003</b> Form 1099-MISC	<b>Miscellaneous Income</b>
	<b>2 Royalties</b> \$		
	<b>3 Other income</b> \$	<b>4 Federal income tax withheld</b> \$ <b>0</b>	<b>Copy E For Recipient</b>
<b>RECIPIENT'S Identification number</b> <b>034-54-7064</b>	<b>5 Fishing boat proceeds</b> \$	<b>6 Medical and health care payments</b> \$	
<b>2UAGLIA</b>	<b>7 Nonemployee compensation</b> <b>\$27,944.00</b>	<b>8 Substitute payments in lieu of dividends or interest</b> \$	<b>This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if e-w this income is taxable and the IRS determines that it has not been reported</b>
<b>LAH</b>	<b>9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale</b> <input type="checkbox"/>	<b>10 Crop insurance proceeds</b> \$	
<b>MA 01005</b>	<b>11</b>	<b>12</b>	
	<b>13 Excess golden parachute payments</b> \$	<b>14 Gross proceeds paid to an attorney</b> \$	
	<b>16 State tax withheld</b> \$ <b>0</b>	<b>17 State/Payer's state no.</b> <b>026-28-2039</b>	<b>18 State income</b> <b>\$27,944.00</b>
	\$		\$

(keep for your records)

Department of the Treasury - Internal Revenue Service

☐ CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no.		1 Rents	OMB No. 1545-0115	Miscellaneous Income
Club Dead Productions c/o Peter A. Stefan 838 Main Street Worcester, MA 01610-1444		\$	2002	
		2 Royalties		
		\$	Form 1099-MISC	Copy B For Recipient
		3 Other income	\$ 0	
PAYER'S Federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	4 Federal income tax withheld	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
026-28-2039	034-54-7064	\$	6 Medical and health care payments	
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	
Frank Quaglia		\$ 12,000.00	\$	
Street address (including apt. no.)		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds	
35 Terry Lane		\$	\$	
City, state, and ZIP code		11	12	
Barre, MA 01005		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney	
Account number (optional)		\$	\$	
15		16 State tax withheld	17 State/Payer's state no.	18 State income
		\$ 0		\$ 12,000.00
		\$		\$

Form 1099-MISC

(keep for your records)

Department of the Treasury - Internal Revenue Service

Copy B To Be Filed With Employee's Federal Tax Return		2002 OMB No. 1545-0008	
1 Control Number 2350 1507	1 Wages, tips, other comp. 6612.43	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
5 Employer ID number 04-6001348	5 Medicare wages and tips 7150.82	6 Medicare tax withheld 103.69	
c Employer's name, address, and ZIP code Town of West Boylston 120 Prescott Street West Boylston, MA 01583			
d Employee's social security number 034-54-7064			
e Employee's name, address, and ZIP code Frank M. Quaglia 35 Terry Lane Barre, MA 01005			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
10 Dependent care benefits	11 Nonqualified plans	12a Code G 538.39	
13 Statutory employee 14 Other S125 27.00		12b Code	
Retirement plan		12c Code	
3rd party sick pay		12d Code	
MA 046001348*08	6612.43	175.38	
15 State Empl.'s state I.D. #	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS  
This information is being furnished to the Internal Revenue Service

Copy 2 To Be Filed With Employee's State, City, or Local Income Tax Return		2002 OMB No. 1545-0008	
1 Control Number 2350 1507	1 Wages, tips, other comp. 6612.43	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
5 Employer ID number 04-6001348	5 Medicare wages and tips 7150.82	6 Medicare tax withheld 103.69	
c Employer's name, address, and ZIP code Town of West Boylston 120 Prescott Street West Boylston, MA 01583			
d Employee's social security number 034-54-7064			
e Employee's name, address, and ZIP code Frank M. Quaglia 35 Terry Lane Barre, MA 01005			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
10 Dependent care benefits	11 Nonqualified plans	12a Code G 538.39	
13 Statutory employee 14 Other S125 27.00		12b Code	
Retirement plan		12c Code	
3rd party sick pay		12d Code	
MA 046001348*08	6612.43	175.38	
15 State Empl.'s state I.D. #	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Copy C For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)		2002 OMB No. 1545-0008	
1 Control Number 2350 1507	1 Wages, tips, other comp. 6612.43	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
5 Employer ID number 04-6001348	5 Medicare wages and tips 7150.82	6 Medicare tax withheld 103.69	
c Employer's name, address, and ZIP code Town of West Boylston 120 Prescott Street West Boylston, MA 01583			
d Employee's social security number 034-54-7064			
e Employee's name, address, and ZIP code Frank M. Quaglia 35 Terry Lane Barre, MA 01005			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
10 Dependent care benefits	11 Nonqualified plans	12a Code G 538.39	
13 Statutory employee 14 Other S125 27.00		12b Code	
Retirement plan		12c Code	
3rd party sick pay		12d Code	
MA 046001348*08	6612.43	175.38	
15 State Empl.'s state I.D. #	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	

Form W-2 Wage and Tax Statement Dept. of the Treasury - IRS  
This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

Extra Employee Copy		2002 OMB No. 1545-0008	
1 Control Number 2350 1507	1 Wages, tips, other comp. 6612.43	2 Federal income tax withheld	
	3 Social security wages	4 Social security tax withheld	
5 Employer ID number 04-6001348	5 Medicare wages and tips 7150.82	6 Medicare tax withheld 103.69	
c Employer's name, address, and ZIP code Town of West Boylston 120 Prescott Street West Boylston, MA 01583			
d Employee's social security number 034-54-7064			
e Employee's name, address, and ZIP code Frank M. Quaglia 35 Terry Lane Barre, MA 01005			
7 Social security tips	8 Allocated tips	9 Advance EIC payment	
10 Dependent care benefits	11 Nonqualified plans	12a Code G 538.39	
13 Statutory employee 14 Other S125 27.00		12b Code	
Retirement plan		12c Code	
3rd party sick pay		12d Code	
MA 046001348*08	6612.43	175.38	
15 State Empl.'s state I.D. #	16 State wages, tips, etc.	17 State income tax	
18 Local wages, tips, etc.	19 Local income tax	20 Locality name	



TOTAL AMOUNT DUE		MONTHLY PAYMENT FACTORS		BALANCES	
Past Due Monthly Payments: \$2,012.12		(For Payment Due: 10/01/06)		Principal Balance:	\$156,762.13
Due 08/01/06 - 09/01/06				Escrow Balance:	\$ .00
Suspense Balance:	\$ .00	Interest Rate:	6.45000%	<b>Amounts Paid Year-To-Date</b>	
Total Amount Past Due:	\$2,012.12	Monthly Payment:	\$1,006.06	Principal:	\$1,276.64
Payment Due on 10/01/06	\$1,006.06	Escrow:	\$ .00	Interest:	\$6,771.84
Expenses Paid by AMC:	\$ .00	Insurance Products/Misc:	\$ .00	Late Charges:	\$127.30
Unpaid Late Charges:	\$174.50	Monthly Total:	\$1,006.06	Hazard Insurance:	\$ .00
Other Fees & Charges:	\$ .00			Taxes/Liens:	\$ .00
<b>Total Expenses/Fees Due:</b>	<b>\$174.50</b>				
<b>Total Amount Due:</b>	<b>\$3,192.68</b>	Next Monthly Payment			
		Change Date:	11/01/06		

To avoid late charges of \$30.18 we must receive your payment by 10/16/06 during business hours.

Visit [www.myamcloan.com](http://www.myamcloan.com).

### ACTIVITY SINCE YOUR LAST STATEMENT

DATE	DESCRIPTION	AMOUNT	PRINCIPAL	INTEREST	ESCROW	INSURANCE PRODUCTS/MISC	LATE CHARGES/ CORP ADV/FEEs	SUSPENSE
09-18	LT CHG ASSESSMT						\$30.18	

### IMPORTANT MESSAGES

A late charge has been assessed. Your loan is past due. Please remit your payment immediately or contact our office at 1-800-430-5262.

There may be additional charges assessed to your loan after the date of this statement. Any funds received that do not include payment for these additional charges are subject to return.

If you are experiencing problems in making your payments, we would like to notify you of the availability of government-approved counseling agencies designed to assist homeowners going through financial difficulties. To obtain the name of an approved counseling agency near you, please call (800) 569-4287, or access an online directory at [www.hudhcc.org](http://www.hudhcc.org). This does not, in any way, amend the terms of your contract with AMC Mortgage Services.

Funds received, in excess of your required monthly payment amount, will be applied in the following order: Expenses paid by AMC, Outstanding fees, Late charges, Escrow advances, and finally additional principal.

Federal Law requires us to notify you that we are acting as a debt collector. If you are currently in a bankruptcy or have received a discharge in bankruptcy as to this obligation, this communication is intended for informational purposes only and is not an attempt to collect a debt in violation of the automatic stay or the discharge injunction.

**Detach And Return This Portion With Your Payment**



**LOAN NUMBER: 0090533621**

**FRANK M QUAGLIA JR**



**I am thinking about refinancing!**  
Contact me about the benefits of refinancing my current loan. (Fill in circle completely)

**Make Check Payable To:**



**AMC MORTGAGE SERVICES**  
P O BOX 5926  
CAROL STREAM IL 60197-5926



**Date Due: 10/01/06**

**Past Due Monthly Payments: \$2,012.12**

**Payment Due On: 10/01/06 \$1,006.06**

**Total Expenses/Fees Due: \$174.50**

**TOTAL AMOUNT DUE: \$3,192.68**

**Late Charge Due After: 10/16/2006 \$30.18**

**(Optional) Additional Principal:**

**(Optional) Additional Escrow Advance:**

**(Optional) Additional Payment:**

**TOTAL AMOUNT ENCLOSED:**

08740009053362100000000010060600010362402



09/14/06  
09:13:12

TOWN OF BARRE  
REAL ESTATE TAX STATEMENT

PAGE 1  
MUTX168 9.4

PARCEL: 000H-0451

LOCATION: 00035 TERRY LANE

CURRENT OWNER:  
QUAGLIA FRANK M JR  
35 TERRY LANE  
BARRE MA 01005

CURRENT STATUS:  
ACRES : 1.62  
LAND VALUATION : 48,300  
BUILDING VALUATION: 146,800  
EXEMPTIONS : 0  
TAXABLE VALUATION : 195,100

DEED DATE: 11/01/99 BOOK: 22009 PAGE: 139

INTEREST DATE: 11/05/06

YEAR	TYPE	FREQUENCY	BILLED	PRIN DUE	INT/COST	TOTAL DUE
2004	RE	FIRST HALF	940.78	.00		
2004	RE	SECOND HALF	940.77	.00		
		TOTAL 2004	1,881.55	.00		
2005	RE	FIRST HALF	1,063.59	.00		
2005	RE	SECOND HALF	1,063.59	.00		
		TOTAL 2005	2,127.18	.00		
2006	RE	FIRST HALF	1,090.61	1,090.61	133.44	1,224.05
2006	RE	SECOND HALF	1,090.61	1,090.61	96.19	1,186.80
		TOTAL 2006	2,181.22	2,181.22	229.63	2,410.85
		GRAND TOTALS	6,189.95	2,181.22	229.63	2,410.85

AMC MORTGAGE SERVICES  
PO BOX 5218  
PASADENA, CA 91107-0218

September 27, 2006

Property at:  
35 TERRY LN  
BARRE, MA 010050000

FRANK M JR QUAGLIA  
35 TERRY LN  
BARRE, MA 010050000

Lender No: 10032  
Loan No: 0090533621  
Investor: 307  
Delinquent Property Taxes

We previously notified you that delinquent taxes and/or assessments have been attached to your property. To date, we have not received proof of payment.

If the delinquent taxes have been paid, please forward a copy of the receipt(s) or canceled check(s) to our office immediately. If you have not paid the delinquent item(s) please contact the tax collector noted below for an exact amount to pay and forward proof to our office.

PLEASE DO NOT SEND TAX PAYMENT TO THIS OFFICE!

If we do not receive a response within 15 days, further action may be taken to pay these delinquent taxes and any related fees; an escrow account may be required for payment of future property taxes. Your prompt attention to this matter is greatly appreciated. If you have questions regarding this letter, please contact our Property Tax Department at (866) 300-8022.

Federal Law requires us to notify you that we are acting as a debt collector. If you are currently in a bankruptcy or have received a discharge in bankruptcy as to this obligation, this communication is intended for informational purposes only and is not an attempt to collect a debt in violation of the automatic stay or the discharge injunction.

-----  
Taxing Agency: BARRE TOWN\*\*  
PO BOX 387, BARRE, MA 1005  
APN 000H-0451

(978) 355-5001

Information as of 07/21/06:  
-----TAX IDENTIFICATION -----  
000H-0451

TAX YR	TOTAL # OF INST	BASE AMT
2005	2	\$2,181.22

M03375.27678859.0

CONTINUED





**LEOMINSTER  
Credit Union**

20 ADAMS ST.  
LEOMINSTER, MA. 01453

Page: 1  
Customer: 37906 09/29/2006

FRANK M QUAGLIA  
35 TERRY LANE  
BARRE MA 01005-9265

\*\*\*\*\*  
\* Account Overdrawn Advice \*  
\*\*\*\*\*

Type: PREFERRED CHECKING

Account Number:	1000237979
Current Balance:	324.77-
Date of Last Deposit:	08/21/2006
Last Deposit Amount:	23.16
Date of Overdraft:	08/21/2006

YOUR ACCOUNT IS STILL OVERDRAWN. PLEASE MAKE A DEPOSIT TO THIS ACCOUNT  
WITHIN THE NEXT TEN DAYS IN ORDER TO AVOID ANY ADDITIONAL FEES. IF A  
DEPOSIT IS NOT MADE TO THIS ACCOUNT IT WILL BE CLOSED.



**LEOMINSTER  
Credit Union**

20 ADAMS ST.  
LEOMINSTER, MA. 01453

Page: 1  
Loan: 1000237979 09/22/2006

FRANK M QUAGLIA  
35 TERRY LANE  
BARRE MA 01005-9265

\* P a s t D u e N o t i c e \*

Loan Type:	OVERDRAFT		
Principal Balance:	500.00	Original Loan Date:	03/13/2004
Current Rate:	18.0000	Credit Limit:	500.00
Interest Thru 09/24/2006:	12.75	Last Payment Received:	07/24/2006
One Day's Interest:	.24	Last Payment Amount:	477.70
Late Charge Balance:	1.05		

Past Due Date: 09/01/2006  
Amount Past Due: 21.05  
Late Charges: 1.05

\*\*\*\*\*  
Total Amount Due: \* 22.10 \* \* Second Notice \*  
\*\*\*\*\*

"YOUR LOAN IS NOW SERIOUSLY PAST DUE. PLEASE CALL US UPON RECEIPT OF THIS NOTICE AT (800) 649-4646 EXT 7313."

If Payment Has Been Made, Kindly Disregard This Notification

\* Please return this portion with your payment \*

P a s t D u e N o t i c e

FRANK M QUAGLIA  
35 TERRY LANE  
BARRE MA 01005-9265

Amount Past Due: 21.05  
Late Charges: 1.05  
Total Amount Due: 22.10

Amount Enclosed: \$ \_\_\_\_\_

Date Payment Was Due: 09/01/2006  
Loan Type: OVERDRAFT  
Loan Number: 1000237979  
Regular Payment T/C: 375

LEOMINSTER CREDIT UNION  
20 ADAMS STREET  
LEOMINSTER, MA 01453



100% RECYCLED PAPER MADE FROM 100% POST CONSUMER WASTE



FRANK M QUAGLIA  
LUCILLE A. QUAGLIA  
35 TERRY LANE  
BARRE MA 01005-9265

REPOSSESSION NOTICE  
RIGHTS OF DEFAULTING DEBTOR UNDER MASSACHUSETTS LAW

You May cure your default on loan number 5167210896 dated 11/10/04 secured by: 2000 NISSAN QUEST GLE by paying to the Leominster Credit Union, 20 Adams Street, Leominster, MA 01453 the amount of \$ 271.72 before 10/17/06. If you pay this amount within the time allowed you will no longer be in default and may continue with the transaction as though no default had occurred.

If you do not cure your default by the date stated in the above paragraph Leominster Credit Union may sue you to obtain a judgement for the amount of the debt or may take possession of the collateral. If Leominster Credit Union takes possession of the collateral you may get it back by paying, within twenty (20) days of the date of the repossession, the full amount of your debt plus any reasonable expenses incurred by us.

Sincerely,

DAVID RICHTER  
COLLECTION DEPARTMENT  
978-466-7324  
CC:File sent by regular and certified mail.





**CREDIT PROTECTION ASSOCIATION, L.P.**

A NATIONWIDE COLLECTION COMPANY

(C) Copyright 1977-2000  
By Credit Protection Association, L.P.**NOTICE**

09/21/2006

#BWNFMBY \*\*\*\*\* MIXED AADC 752

#01277155890#



01277155890

Frank Quaglia  
35 Terry Ln  
Barre, MA 01005-926501-014080-8350120380126073-00  
Your SSN # XXX-XX-7064

Our records show that there continues to be a remaining unpaid balance on this account. Continuing to ignore our requests for payment will not make this debt go away. Our client, Charter Comm-Worcester, is recommending that this debt and the remaining balance due be transferred to another agency for further action.

Now is the time to put an end to this outstanding debt. Do not wait any longer - take action today. Use this letter as a chance to pay your balance in full and have your records updated with your payment information.

Once payment is received and settlement made by your financial institution, Credit Protection Association will process your payment and change this account's status to Paid.

To take advantage of this opportunity, mail your payment today and include the attached payment coupon for proper credit or call 877-332-2432 to make payment by phone.

THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

CPA - 900 Hingham Avenue - Rockland, MA 02076 (800) 230-0770  
Credit Protection Association, L.P. 13355 Noel Rd., Dallas, TX 75240  
(972) 991-3171 / Dallas Office Hours: 8:00 am to 5:30 pm CST Monday - Friday

6207-0001

FOLD, TEAR AND RETURN THIS PORTION WITH YOUR PAYMENT

01-014080-8350120380126073-00

01277155890

Frank Quaglia

Service balance: \$354.86

Equipment at: \$45.00

Total amount due: \$399.86

Amount Paid: \_\_\_\_\_

09/21/2006

Remit to:

NOTICE: Please see reverse side of letter for important information regarding check payments.

Credit Protection Assoc.  
PO Box 9037  
Addison, TX 75001-9037

02 01014080 00000000001277155890 0039986 5

**CREDIT PROTECTION ASSOCIATION, L.P.****- A NATIONWIDE COLLECTION COMPANY -**(C) Copyright 1977-2005  
By Credit Protection Association, L.P.**This is an attempt to collect a debt and any information obtained will be used for that purpose.**CPA 800 Hingham #200N Rockland, MA 02370 (800) 255-6775  
(972) 991-3171 / Dallas Office Hours: 8:00am to 5:30pm CST Monday - Friday

01277155890

#BWNFMBY \*\*\*\*\*MIXED AADC 752  
#01277155890#Frank Quaglia  
35 Terry Ln  
Barre, MA 01005-9265

12/23/2005

**For convenient payment options  
call (800) 418-8144 or  
go to [www.paycpa.com](http://www.paycpa.com)**RE: Your account with Charter Comm-Worcester  
Toll Free # 95 Higgins St  
(800) 634-1008 Worcester MA 01606-191301-014080-8350120380126073-00  
Your SSN # XXX-XX-7064

Dear Frank Quaglia:

Charter Comm-Worcester has informed us that no payment or arrangement was made to settle your overdue account in the amount of \$399.86, which includes 1 non-returned equipment valued at \$45.00. Be advised that the thirty (30) day validation period discussed in our first letter concerning the validity of your debt will pass within the next three (3) weeks. If you do not seek validation, we will assume that your debt is valid at the end of that period.

Please note that unless you resolve your overdue account, Credit Protection Association will continue all collection efforts.

To insure proper credit, include the bottom portion of this letter with your payment. If payment has already been made, please contact Charter Comm-Worcester.

For your convenience Credit Protection Association accepts Visa®, MasterCard® and Check payments by phone or web 24 hours a day, 7 days a week via our Automated Payment System. To use the system, please call toll free at (800) 418-8144 or visit our web site at [www.paycpa.com](http://www.paycpa.com). Please have your 11 digit reference number 01277155890 available.

Very truly yours,

J W Preston

5102-0001

**Credit Protection Association, L.P. 13355 Noel Rd., Dallas, TX 75240****FOLD, TEAR AND RETURN THIS PORTION WITH YOUR PAYMENT**

01-014080-8350120380126073-00

01277155890

Frank Quaglia

Service balance:

\$354.86

Equipment at:

\$45.00

Total Amount Due:

\$399.86

Amount Paid: \_\_\_\_\_

12/23/2005

Remit to:

NOTICE: Please see reverse side of letter for  
important information regarding check payments.Charter Comm-Worcester  
95 Higgins St  
Worcester MA 01606-1913

02 01014080 00000000001277155890 0039986 5